

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

<b>DOCUMENT # P98000027486</b> 1. Entity Name <b>MAC &amp; MAC INDUSTRIES, INC.</b>	
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**FILED**  
**Jul 22, 2008 08:00 AM**  
**Secretary of State**

Principal Place of Business <b>4126 LOUIS AVE.</b> <b>HOLIDAY, FL 34691</b>	Mailing Address <b>4126 LOUIS AVE.</b> <b>HOLIDAY, FL 34691</b>
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07162008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number <b>59-3500431</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent
<b>MACINTYRE, BRUCE JR</b> <b>4126 LOUIS AVE.</b> <b>HOLIDAY, FL 34691</b>

DO NOT WRITE  
IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 12, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>MACINTYRE, BRUCE K SR</b> <b>2653 BARKSDALE COURT</b> <b>CLEARWATER, FL 33761</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>MACINTYRE, BRUCE JR</b> <b>427 DENISE STREET</b> <b>TARPON SPRINGS, FL 34689</b>
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 07/22/08-80010-015-150.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Bruce MacIntyre* **Bruce MacIntyre** 7-15-08 727-934-3900  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #